

FEB 14 2006



601 W. 1st Avenue, Suite 1300
Spokane, WA 99201-3828
(509) 624-4276
FAX (509) 838-3424
www.wellsstjohn.com

PATENTS ■ TRADEMARKS ■ COPYRIGHTS

FACSIMILE COVER PAGE

TO: U.S. Patent and Trademark FAX NO: (571) 273-8300
Office

FROM: Racquel M. Esplin
Assistant to James E. Lake NO. OF PAGES: 14

DATE: February 14, 2006

OUR FILE: MI22-1913

RE: Application Serial No. 10/050,334

SUBJECT/MESSAGE:

This is a refax. Please do not charge our account twice. If you have any questions please feel free to contact me at (509) 624-4276, ext. 139. Thank you.

CONFIDENTIALITY NOTICE

This facsimile transmission (and/or the documents accompanying it) may contain confidential information that is privileged, confidential or exempt from disclosure under federal or state law. The information is intended only for the use of the individual or entity named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this information is strictly prohibited. If you have received this transmission in error, please call our office collect at (509)624-4276 immediately to arrange for the return of the documents. Thank you.

02/14/2006 17:51 FAX 5098383424
02/14/2006 17:45 FAX 5098383424

WELLS ST JOHN PS
WELLS ST JOHN PS

002/014
001

*** TX REPORT ***

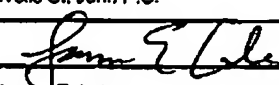
TRANSMISSION OK

TX/RX NO 3962
RECIPIENT ADDRESS #78815712738300
DESTINATION ID
ST. TIME 02/14 17:42
TIME USE 02:54
PAGES SENT 10
RESULT OK

RECEIVED
CENTRAL FAX CENTER

FEB 14 2006

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/050,334
		Filing Date	January 15, 2002
		First Named Inventor	Vishnu K. Agarwal
		Art Unit	2813
		Examiner Name	Tuan H. Nguyen
Total Number of Pages in This Submission	10	Attorney Docket Number	M122-1913

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks Customer No. 021567 The Commissioner is hereby authorized to charge any fees under 37 C.F.R. 1.16 and 1.17 which may be required by this paper to Deposit Account No. 23-0925.	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Wells St. John P.S.	
Signature		
Printed name	James E. Lake	
Date	14 Feb 2006	Reg. No. 44,854

CERTIFICATE OF TRANSMISSION/MAILING

USPTO 2/14/2006 7:47 PM PAGE 1/001 Fax Server
 Auto-reply fax to 5098383424 COMPANY:

Auto-Reply Facsimile Transmission



TO:

Fax Sender at 5098383424

Fax Information

Date Received:

2/14/2006 7:43:25 PM [Eastern Standard Time]

Total Pages:

9 (including cover page)

ADVISORY: This is an automatically generated return receipt confirmation of the facsimile transmission received by the Office. Please check to make sure that the number of pages listed as received in Total Pages above matches what was intended to be sent. Applicants are advised to retain this receipt in the unlikely event that proof of this facsimile transmission is necessary. Applicants are also advised to use the certificate of facsimile transmission procedures set forth in 37 CFR 1.8(a) and (b), 37 CFR 1.6(f). Trademark Applicants, also see the Trademark Manual of Examining Procedure (TMEP) section 306 et seq.

Received
Cover
Page
=====>

02/14/2006 17:52 FAX 5098383424		WELLS ST JOHN PS		004/014				
<p>PROCESSED BY THE U.S. PATENT AND TRADEMARK OFFICE, U.S. DEPARTMENT OF COMMERCE</p> <p>Application Number: 10060324</p> <p>First Date: January 18, 2006</p> <p>First Named Inventor: YVES H. AGREST</p> <p>Art Unit: 2813</p> <p>Examiner Name: TARA H. NGUYEN</p> <p>Adm by Doclet Number: 8328183</p>								
<p>TRANSMITTAL FORM</p> <p>As issued for correspondence after issue: 10</p> <p>Total Number of Pages in this Submission: 10</p>								
<p>ENCLOSURES (Check all that apply)</p> <table border="1"> <tr> <td> <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> Alter Final <input type="checkbox"/> Affidavit/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Ready to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.55 or 1.55 </td> <td> <input type="checkbox"/> Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refuse <input type="checkbox"/> CD Number of CD(s) <input type="checkbox"/> Landmark Table on CD <input type="checkbox"/> Other </td> <td> <input type="checkbox"/> Alter Allowance Communication to TO <input type="checkbox"/> Appeal Communication to Board of Appeals and Interventions <input type="checkbox"/> Appeal Communication to TO (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Disciplinary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (Please Identify Below): </td> </tr> </table>						<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> Alter Final <input type="checkbox"/> Affidavit/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Ready to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.55 or 1.55	<input type="checkbox"/> Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refuse <input type="checkbox"/> CD Number of CD(s) <input type="checkbox"/> Landmark Table on CD <input type="checkbox"/> Other	<input type="checkbox"/> Alter Allowance Communication to TO <input type="checkbox"/> Appeal Communication to Board of Appeals and Interventions <input type="checkbox"/> Appeal Communication to TO (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Disciplinary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (Please Identify Below):
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> Alter Final <input type="checkbox"/> Affidavit/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Ready to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.55 or 1.55	<input type="checkbox"/> Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refuse <input type="checkbox"/> CD Number of CD(s) <input type="checkbox"/> Landmark Table on CD <input type="checkbox"/> Other	<input type="checkbox"/> Alter Allowance Communication to TO <input type="checkbox"/> Appeal Communication to Board of Appeals and Interventions <input type="checkbox"/> Appeal Communication to TO (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Disciplinary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (Please Identify Below):						
<p>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</p> <p>Firm Name: Wells St. John P.C.</p> <p>Signature: [Signature]</p> <p>Printed name: JAMES E. LERO</p> <p>Date: 14 Feb 2006</p> <p>Reg. No.: 44,854</p>								
<p>CERTIFICATE OF TRANSMISSION/MAILING</p> <p>I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage so that same will be in an envelope addressed for Correspondence for Patents, P.O. Box 1458, Alexandria, VA 22313-1458 on the date shown below:</p> <p>Signature: [Signature]</p> <p>Typed or printed name: RACQUEL M. EAGAN</p> <p>Date: February 14, 2006</p> <p>Faxed to: (571) 273-8300</p>								
<p><small>This disclosure of information is required by 37 CFR 1.5. The information is required to alert a search of the prior art by the USPTO to include an electronic search. Confidentiality is preserved by 38 U.S.C. 122 and 37 CFR 1.11 and 1.16. The subject is referred to 2 hours to complete. Transmittal, printing, and mailing the completed application form to the USPTO. There will be no charge for the highest class. Any documents or the product of this process to complete the form under suspension for receiving it's further, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1458, Alexandria, VA 22313-1458. DO NOT SEND FILES OR APPLICATIONS TO THE ADDRESS. 8328183 YH Correspondence for Patents, P.O. Box 1458, Alexandria, VA 22313-1458.</small></p> <p><small>If you need assistance in completing this form, call 1-800-PTO-PTO and select option 2.</small></p>								

BEST AVAILABLE COPY

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

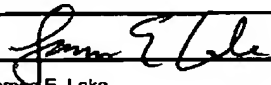
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

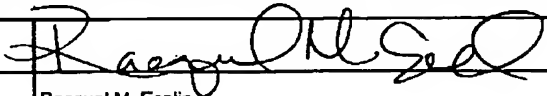
TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/050,334	
	Filing Date	January 15, 2002	
	First Named Inventor	Vishnu K. Agarwal	
	Art Unit	2813	
	Examiner Name	Tuan H. Nguyen	
Total Number of Pages in This Submission	10	Attorney Docket Number	MI22-1913

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Customer No. 021567 The Commissioner is hereby authorized to charge any fees under 37 C.F.R. 1.16 and 1.17 which may be required by this paper to Deposit Account No. 23-0925.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Wells St. John P.S.		
Signature			
Printed name	James E. Lake		
Date	14 Feb 2006	Reg. No.	44,854

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			Faxed to (571) 273-8300
Typed or printed name	Racquel M. Esplin	Date	February 14, 2006

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

180.00

Complete if Known

Application Number	10/050,334
Filing Date	January 15, 2002
First Named Inventor	Vishnu K. Agarwal
Examiner Name	Tuan H. Nguyen
Art Unit	2813
Attorney Docket No.	MI22-1913

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 23-0925 Deposit Account Name: Wells St. John P.S.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	0
Design	200	100	100	50	130	65	0
Plant	200	100	300	150	160	80	0
Reissue	300	150	500	250	600	300	0
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=	0

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	0

HP = highest number of independent claims paid for, if greater than 3.

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)
0	0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supplemental Information Disclosure Statement

Fees Paid (\$)

0

180.00

SUBMITTED BY

Signature

Registration No.
(Attorney/Agent) 44,854

Telephone (509) 624-4276

Name (Print/Type) James E. Lake

Date 14 Feb 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.